LZ0000353219

(Requestor's Name) (Address)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(20000000, 100000,
(Document Number)
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2020 DEC -1 PM 2:48

LA-1/13/21

COVER LETTER

TO: Registration Solution of Col.	rporations	, , ,		
SUBJECT: G	ARAL INVE.	STORS LLC		
зовяест. <u> — </u>	Name of Lin	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	FA	RANCISCO J Name of Person	GARCIA	
		Name of Person		
	27.	24 NAKINA Firm/Company	Ct	
		Firm/Company		
	OR	lando FI	32837-7729	
		Address	······································	
		City/State and Zip Code		
		6 @ AOL. COM		
	E-mail address: (to be used for future annual report	(t notification)	
	concerning this matter, please e			
FRANCISCO	J GARCIA	al 407, 91	3.4260	
Name c	of Person	Area Code D	aytime Telephone Number	
Enclosed is a check for t	he following amount:			
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Addre</u> Registration :		Street Addre Registration		
— Division of C	Corporations	Division of	Division of Corporations	
P.O. Box 632 Tallahassee,			of Tallahassee onroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

GARAI TNVESTO (Name of the Limited Liability Compa (A Florida Limited L	es LLC	- and some seconds \	
(A Florida Limited L	no as it now appea nability Company)	is on our records.)	
The Articles of Organization for this Limited Liability Company	were filed on	11-06-20	_ and assigned
Florida document number			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company h	ere:	
N/A The new name must be distinguishable and contain the words "Limited Liabil			
The new name must be distinguishable and contain the words "Limited Liabil			
Enter new principal offices address, if applicable:	NA		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		の 日間 これ これ	<u> </u>
		~	
	,	Q	<u> </u>
Enter new mailing address, if applicable:	NA	`	* : フ
(Mailing address MAY BE A POST OFFICE BOX)			5
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our r	ecords, <u>enter the name o</u>	f the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	rida street address	
		, Florida	Vi C . 1 .
N D. data and A Characters of about in a Daniel and America	City	•	Lip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of rovided for in C	my duties, and I am fam. Thapter 605, F.S. Or, if to	iliar with and his document is

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	FRANCISCO J GARCIA	2724 NAKINA CH	XAdd
		ORIANdo, Fl. 32837-7	1729 Remove
			□Change
			□Add
			Remove
			□Change
			□Add
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			Remove
			□Change
			🗆 Add
			Remove
			□Change

	Please also correct the spelling of
	my first Name it is listed as Fransisco - Wrong (type error)
	FRANCISCO - CORRECT
	
Note: If	date, if other than the date of filing:
the record s cord is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	November 24 2020
	Signature of a member or authorized representative of a member
	FRANCISCO J. GARCIA Typed or printed name of signee

Filing Fee: \$25.00